

UTAH COOPERATIVE MARKETING PROGRAM

*The mission of the Utah Cooperative Marketing Program is to leverage state and co-op partner funding to **attract out-of-state visitors** to increase tourism expenditures*

REGULAR COOPERATIVE MARKETING APPLICATION INSTRUCTIONS

Please review the Regular Cooperative Marketing Guidelines before completing this application. Please submit a total of 10 copies of the application. **Applications should be stapled or clipped – no binders please. Application questions must be included with response.** Provide complete answers to all questions.

The finished Application packet will include:

1. **The application cover page**
2. **Narrative responses to the 13 questions.**
3. **Attachment 1:** List of current Board members.
4. **Attachment 2:** Copy of **Federal** IRS tax exempt determination letter. Does not apply to cities and counties.
5. **Attachment 3:** Financial audits, consolidated financial statements, income statements or balance sheet proving financial solvency.
6. **Attachment 4:** Letters of financial commitment, including specific dollar amounts for 100% of match. **Letters of financial commitment must be signed by and submitted on contributor's letterhead.**
7. **Attachment 5:** Letter(s) of project support (Optional).

Please submit ten (10) complete copies of the application to the Utah Office of Tourism (UOT) by 4:00 p.m. on Thursday, June 25, 2009. Applicants are encouraged to submit applications early, as this will allow staff more time to review the applications and notify the applicant if something is missing. **Applications that are incomplete after the deadline will not be considered for funding.** Applicants will be notified of, and invited to participate in an oral interview with the Co-op Committee during the application review process.

Please send completed application to:

Kelly Day
Utah Office of Tourism - Co-op Marketing Program
Council Hall/Capitol Hill
300 North State Street
Salt Lake City, UT 84114
(801) 538-1727

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REGULAR COOPERATIVE MARKETING APPLICATION COVER PAGE

Round 7 – June 25, 2009

Primary Contact: _____

Name of Applicant Organization: _____

Amount Requested from UOT: \$ _____

(Please list only the amount of co-op dollars requested – not the total project cost)

List all entities contributing matching funds for this project:

Applicant / Amount: _____ \$ _____

Partner / Amount: _____ \$ _____

Partner / Amount: _____ \$ _____

Partner / Amount: _____ \$ _____

Federal Tax Identification Number of Applicant Organization: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

County: _____

Telephone: _____ Fax: _____

E-Mail Address: _____

(Please note that all electronic correspondence from the UOT will be sent to this address)

Organization Website: _____

Authorization

I hereby certify that the facts, figures, and representations made in this application, including all attachments, are true and correct to the best of my knowledge.

Applicant:

Signature of Responsible Party Title Printed Name Date



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REGULAR COOPERATIVE MARKETING APPLICATION NARRATIVE QUESTIONS

*We urge you to write clearly and succinctly. **Please include the questions in your response and provide your responses in the order listed below.***

1. Co-op funds cannot be matched with other state dollars.
 - a. Identify the source of matching funds.
 - b. List any state support you are currently receiving.
 - c. **Include a detailed line-item project cost breakdown.** You may use a separate sheet if desired. Applicants will be required to submit original invoices with final report.
2. List all partner logos that will appear with the state logo.
3. What will you be marketing / promoting (what destination, event, attraction)?
4. Who is your target market? Describe the demographics of the out-of-state visitor you are trying to attract to your area.
5. How will you reach your target market? (i.e. magazines, newspaper, TV, radio, etc.) Please be specific.
6. In what geographic area(s) will you be marketing?
7. Project start date - when will you begin actively working on this project?
8. When will your project/promotion be "in-market?"
9. What is the date of your event (if applicable)?
10. What are the primary goals and objectives of your project/event and how will you measure the success? Provide a baseline along with your estimated increase in visitors. Examples could include:
 - To increase TRT numbers from \$_____ to \$_____
 - Increase number of room nights from _____ room nights to _____ room nights
 - Increase number of tickets sold from _____ to _____

Please note: Preference will be given to measurables that will demonstrate increased expenditures in your area, i.e. visitor spending, number of room nights increased, number of out-of-state visitors, increase in Transient Room Tax, number of event tickets sold, etc. The number of hits on your website is not a measurement of economic success.

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11. What is the estimated increase in out-of-state visitors? Provide a baseline along with your estimated increase in visitors from _____ to _____.
12. Demonstrate how the project has the support and/or involvement of the community. List any partners, sponsors, volunteers and their contributions.
13. Have you received Utah Co-op funding before? If so, briefly describe the co-op project, note the status of that project, provide detailed evidence of successes including tangible results if available, and enter the amount awarded:

Round 1 – 11/04/05 \$ _____

Round 2 – 12/09/05 \$ _____

Round 3 – 05/25/06 \$ _____

Round 4 – 09/15/06 \$ _____

Round 5 - 8/10/07 \$ _____

Round 6 - 8/07/08 \$ _____

Attachment 1: List of current board members

Attachment 2: Copy of Federal IRS tax exempt determination letter.

Attachment 3: Financial audits, consolidated financial statements, income statements or balance sheet, etc. proving financial solvency.

Attachment 4: Letters of financial commitment including specific dollar amounts for 100% of match. Letters of financial commitment must be signed by and submitted on contributor's letterhead.

Attachment 5: Letters of project support (*Optional*).